

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Packet No. A-67465/RFT/RMS

Anticipated Classification of
this Application:

Class: Subclass:

Prior Application:

Examiner:

Art Unit:

"EXPRESS MAIL" MAILING LABEL

NUMBER EL100139550US

DATE OF DEPOSIT April 21, 1999

I HEREBY CERTIFY THAT THIS PAPER OR FEE IS BEING
DEPOSITED WITH THE UNITED STATES POSTAL SERVICE
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37 CFR 1.10 ON THE DATE INDICATED ABOVE AND IS
ADDRESSED TO: BOX PATENT APPLICATION FEE, ASSISTAN
COMMISSIONER FOR PATENTS, WASHINGTON, DC 20231.

TYPED NAME Geody Domingo

SIGNED 

Box PATENT APPLICATION FEE
Assistant Commissioner for Patents
Washington, DC 20231

Sir:

This is a request for filing an

- ☒ Original
☐ Continuation
☐ Divisional
☐ Continuation-in-part

application under 37 C.F.R. 1.53(b), in the name of KAYYEM, Jon Faiz (Names
of ALL Applicants), for THE USE OF MICROFLUIDIC SYSTEMS IN THE
ELECTROCHEMICAL DETECTION OF TARGET ANALYTES (Title of Invention).

1. (a) ☒ Enclosed is a new application.
(b) ☐ Enclosed is a continuation-in-part application.
(c) ☐ Enclosed is a copy of the prior application.
2. (a) ☐ Enclosed is a new Declaration.
(b) ☐ Enclosed is a copy of the prior executed Declaration as
originally filed.

A-67465/RFT/RMS

Form 1.16b (8069)

01/98

(c) ____ Enclosed is a Combined Declaration/Power of Attorney.

3. (a) ____ Enclosed is a Small Entity Affidavit.

4. ____ The filing fee is calculated below:

Claims as filed in the prior application, less any claims canceled by amendment below:

	(Col. 1)	(Col. 2)	<u>SMALL ENTITY</u>		<u>OTHER THAN A SMALL ENTITY</u>	
FOR:	<u>NO. FILED</u>	<u>NO. EXTRA</u>	<u>RATE</u>	<u>FEE</u>	OR	<u>RATE</u> <u>FEE</u>
BASIC FEE				\$380	OR	\$
TOTAL CLAIMS	____-20 =	* ____-0-____	x 9 =	\$ ____	OR	x 18= \$ ____
INDEP CLAIMS	____-3 =	* ____-0-____	x 39 =	\$ ____	OR	x 78= \$ ____
[X] MULTIPLE DEPENDENT CLAIM PRESENTED			+130 =	\$ ____	OR	+260= \$ ____
If the difference in Col. 1 is less than zero, enter "0" in Col. 2.			TOTAL	\$ ____	OR	TOTAL \$ ____

5. ____ The Commissioner is hereby authorized to charge any additional fees which may be required, including extension fees, or credit any overpayment to Deposit Account No. 06-1300 (Order No. A-).

6. ____ Our check in the amount of \$____ is enclosed.

7. ____ Cancel in this application original claims ____ of the prior application before calculating the filing fee. (At least one independent claim must be retained for filing purposes.)

8. ____ Amend the specification by inserting before the first line the sentence:

--This is a ____ continuation ____ division ____ continuation-in-part of application Serial No. ____ filed ____.--

9. (a) X Informal drawings are enclosed, 1 sheets.

(b) ____ Formal drawings are enclosed, ____ sheets.

10. (a) _____ Priority of Applications Serial No. _____ filed on _____ in _____ is claimed under 35 U.S.C. §§ 119 and 120/121.

(b) _____ The certified copy has been filed in prior application Serial No. _____ filed on _____.

11. _____ An Assignment is enclosed.

12. _____ The prior application is assigned of record to _____.

13. _____ A Power of Attorney by Assignee is enclosed.

14. _____ The power of attorney in the prior application is to:

(name)

(address)

(a) _____ The power appears in the original papers in the prior application.

(b) _____ Since the power does not appear in the original papers, a copy of the power in the prior application is enclosed.

(c) X Address all future communications to:

FLEHR HOHBACH TEST ALBRITTON & HERBERT LLP
Suite 3400, Four Embarcadero Center
San Francisco, California 94111-4187
Telephone: (415) 781-1989

15. _____ A preliminary amendment is enclosed. (Claims added by this amendment have been properly numbered consecutively beginning with the number next following the highest numbered original claim in the prior application.)

16. _____ A Prior Art Statement is enclosed.

17. _____ I hereby verify that the attached papers are a true duplicate
of prior application Serial No. _____ as originally filed
on _____.

Date: April 20, 1999

Robin M. Silva

ROBIN M. SILVA

Registration No. 38,304

Address of Signer: _____

Attorney or agent of record

FLEHR HOHBACH TEST ALBRITTON

X

Filed under Section 1.34(a)

& HERBERT LLP

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